App	lication	or Doc	ket N	lumba
·VPP	110411011			Juliane

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Claims as filed - part I small entity other than										THAN		
(Column 1)			(Column 2)			TYPE		OR				
TOTAL CLAIMS		31		Markey Commence			RATE	FEL		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS . 3/ minus 20=			û	//		X\$ 9=	,	OR	X\$18=	198		
INDEPENDENT CLAIMS & minus 3 =			\$	5		X40=		OR	X80=	400		
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=	700	
* If the difference in column 1 is less than zero, enter				r "0" in c	olumn 2		TOTAL		OR	TOTAL	1308 -	
CI AILLA AR ALLELINCIA DA PLILA						•,		, John L	<u> </u>	JON	ι	<u> </u>
CLAIMS AS AMENDED - PART II OTHER THAP (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
Ø		CLAIMS REMAINING	2013	HIGH NUM	IEST		-		ADDI-	1		ADDI-
AMENDMENT &	新世界 。	AFTER		PREVIO	OUSLY	PRESENT EXTRA		RATE	TIONAL FÉE		RATE	TIONAL FEE
	Total		Minus	## 		=		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	000				X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								\$ **		•••		8
The same of the sa								.÷135=		OR	+270=	7
	.*	7	1 6				in the second	TOTAL		OR	TOTAL	
	ADDIT FEE											
		CLAIMS_	A:	(Colu	INN 2) HEST	(Column 3))]	, , , , , , , , , , , , , , , , , , ,		 1		
60	13.76	REMAINING		NUM	BER	PRESENT	3.	RATE	ADDI- TIONAL		DATE	ADDI-
2	fire transport as	AFTER			OUSLY FOR	EXTRA *	·	MAIL	FEE		RATE	TIONAL FEE
AMENDMENT	Total	ø	Minus,	άú		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=]	X40=		- 	V00	
€	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A40=		OR	X80=	
	/-						ਹ, ਜਾ	+135=		OR	+270=	
	•	•			‡ /		•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
	2 -	(Column 1)		(Colu	mn 2)	(Column 3)		ADDII. FEET		9	ADDII. PĘĘĮ	
		CLAIMS	The Evilla	HIGH	IEST	<u>(Columnic)</u>	ו ר	· ·	4 D D I	ı· :	· · · · · · · · · · · · · · · · · · ·	4551
L		REMAINING AFTER	17.0		iber Ously	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Z.		AMENDMENT			FOR	EXIDA		177, 2	FEE		IIAIL	FEE
AMENDMENT C	Total	*	Minus	**		=		X\$ 9=	·	OR	X\$18=	
Se Se	Independent	*	Minus			=		X40=		2.0	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR	700-		
								+135=		OR	+270=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR ADDIT FEE											
**	if the entry in colui If the "Highest Nui 'If the "Highest Nu	mber Previously Pa	aid For" IN THI	S SPACE	is less thai	n 20, enter "20	."	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	<u> </u>